



# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/653,529		
Filing Date	September 2, 2003		
First Named Inventor	Braune, Ingolf		
Art Unit	2877		
Examiner Name	Unassigned		
Total Number of Pages in This Submission	4	Attorney Docket Number	089441-000000US

## ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input checked="" type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
		Return Postcard German Search Report with English translation thereof 15 Cited References
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Townsend and Townsend and Crew LLP J. Georg Seka	
Signature		
Date	January 2, 2004	

## CERTIFICATE OF TRANSMISSION/MAILING

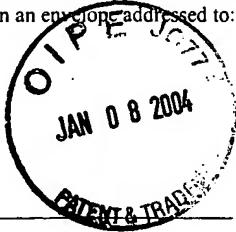
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

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Signature		Date	1/5/09

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On 1/5/2004



TOWNSEND and TOWNSEND and CREW LLP

By: 

**PATENT**  
Attorney Docket No.: 089441-000000US  
Client Reference No.: S8432PUS

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

Ingolf BRAUNE  
Martin WUESTEFELD

Application No.: 10/653,529

Filed: September 2, 2003

For: OPTICAL MONITORING  
APPARATUS

Examiner: Unassigned

Art Unit: 2877

**INFORMATION DISCLOSURE  
STATEMENT UNDER 37 CFR §1.97 and  
§1.98**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

The references cited on attached form PTO/SB/08A and PTO/SB/08B are being called to the attention of the Examiner. Copies of the references are enclosed. It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

Also enclosed is a copy of the Search/Examination report corresponding to the related German application.

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

Applicant believes that no fee is required for submission of this statement. However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,

  
J. Georg Seka  
Reg. No. 24,491

TOWNSEND and TOWNSEND and CREW LLP  
Two Embarcadero Center, Eighth Floor  
San Francisco, California 94111-3834  
Tel: 415-576-0200  
Fax: 415-576-0300  
JGS:mbn  
60110606 v1



Substitute for form 1449B/PTO				<b>Complete if Known</b>	
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>					
(use as many sheets as necessary)					
Sheet	1	of	1		
				Application Number	10/653,529
				Filing Date	September 2, 2003
				First Named Inventor	Braune, Ingolf
				Art Unit	2877
				Examiner Name	Unassigned
				Attorney Docket Number	089441-000000US

<b>U.S. PATENT DOCUMENTS+</b>					
		Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
Examiner Initials*	Cite No. <sup>1</sup>	Number Kind Code <sup>2</sup> (if known)			
	AA	US-5,579,884	12-03-1996	Appleyard et al.	

<b>FOREIGN PATENT DOCUMENTS</b>						
Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document			Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Country Code <sup>3</sup>	Number <sup>4</sup>	Kind Code <sup>5</sup> (if known)		
	AB	DE	1 566 730		07-15-1971	Sick
	AC	DE	25 08 366		09-16-1976	Sick
	AD	DE	35 32 197	C2	03-12-1987	Spratte et al.
	AE	DE	296 08 139	U1	07-11-1996	Leuze electronic GmbH + Co
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	AI	DE	199 24 470	A1	09-21-2000	Klingelhöfer et al.
	AJ	DE	100 27 156	A1	06-12-2001	Fiessler
	AK	DE	200 22 604	U1	03-21-2002	Ruckh
	AL	DE	100 55 689	A1	05-16-2002	Nutz et al.
	AM	DE	101 14 784	A1	10-10-2002	Wüstefeld et al.
	AN	EP	0 083 431	A1	07-13-1983	Reiner
	AO	WO	00/67932		11-16-2000	Appleyard

Examiner Signature	Date Considered
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.